PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/729,022			ing Date 08/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
Н	FOR	l N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	-	N/A	LD NO	N/A		N/A	TLE (0)	i	N/A	TLE (0)	
\vdash	SEARCH FEF	or (c))	N/A	_	N/A		N/A		ı	N/A		
H	(37 CFR 1.16(k), (i), EXAMINATION FE		N/A		N/A N/A		N/A		ł	N/A N/A		
	(37 CFR 1.16(o), (p), FAL CLAIMS		minus 20 =		. N/A		\vdash		OR			
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 20 = *				x \$ =		OR	x s =		
(37	CFR 1.16(h))	If the	If the specification and drawi		as suspend 100	1	A # -		ı	^ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	n size fee due								
	MULTIPLE DEPEN	7 CFR 1.16(j))	1			1						
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	04/20/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 39	Minus	·· 52	= 0	1	x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 6	Minus	···5	= 1	1	x \$ =		OR	X \$200=	200	
	Application Size Fee (37 CFR 1.16(s))											
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	200	
		(Column 1)		(Column 2)	(Column 3)	_						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus		-	1	x \$ =		OR	x \$ =		
M	Independent (37 CFR 1,16(h))		Minus	***]	x \$ =		OR	x \$ =		
Ī	Application Size Fee (37 CFR 1.16(s))]			1			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
									OR	TOTAL ADD'L FEE		
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20", "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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